Best Available Copy

نڍ								Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 99819458												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							RA	TE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASE	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			24 minus 20=		• 4		X\$ 9=			OR	X\$18=	72
INDEPENDENT CLAIMS			4				X40-			OR	X80=	80
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT			+135		5=		OR	+270=	
* If the difference in column 1 is less than zero, enter "T in column 2							TO	TOTAL		OR	TOTAL	882
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SM	WL !	ENTITY	OR	OTHER SMALL		
MEMDMENTA		CLAIMS REMARKING AFTER AMERIDMENT		HIGH HUM PREVI PAID	BER	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE
MOP	Total	. 24	Minus:	- 3	2-(z	XS	9=		OR	X\$18=	
	Independent	. 4	Minus		4	-	X4)= -		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+13	5=		OR	+270=	
							ADDIT	YAL FEE		OR	YOYAL ADOIT, FEE	
	- (Column 1) (Column 2) (Column 3)											
ENT B		CLAINS REMAINING AFTER AMENDMENT		PREV	HEST HEER OUSLY FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total	• [.]	Minus	0	24	•	X\$	9=		OR	X\$18=	
AMENDMEN	Independent	· 2-	Minus	•••	4	-	X 4) -		OR	X80=	
L	PINST PRESE	NTATION OF M	OCIALE	UEP ENDEN	, QLJQIII	لضاحات	+13	5=		OR	+270=	
							ADDIT.	YAL FEE		ОЯ	YOYAL ADDIT, FEE	
1)	1-14-00	(Column 1)		(Colu	mn 2)	(Column 3)				_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST HIBER OUSLY FOR	PRESENT EXTRA	RAT	Æ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total	• //	Minus		94	•	XS	9-		OR	X\$18=	
NE SE	Independent	1.2	Minus	DEDENDEN	TEL ATT	•	X40)a		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								5=		OR	+270=	

"If the entry is column 1 is less than the entry in column 2, write "o' in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The Trignast Number Previously Paid For (Total or independent) is the highest number lound in the appropriate box in column 1.

FORM PTO-075

Param and Trademark Office, U.S. DEPARTMENT OF COMMERCE